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CLAIMS AS FILED - PART I (Column 1) (Column 3) SMALL E								L ENTITY	OR		ER THAN L'ENTIT	
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.16(4))							TOTAL ·	<u> </u>	OR	TOTAL		
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* If the entry in column's its less than the entry in column's write '0' in column 3.

"If the "Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3".

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